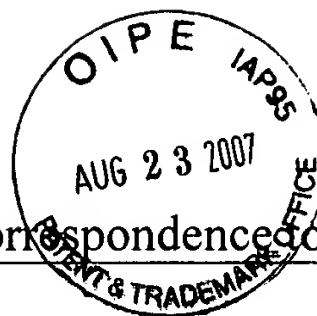


RC 2 ✓
JFW



Please Direct All Correspondence to Customer Number **20995**

REQUEST FOR CONTINUED EXAMINATION

Applicant : Hamilton, et al.
App. No : 09/851,230
Filed : May 8, 2001
For : METHOD OF TREATMENT AND
AGENTS USEFUL FOR SAME
Examiner : M. Belyavskiy
Art Unit : 1644

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

August 21, 2007

(Date)

Daniel E. Altman
Daniel E. Altman, Reg. No. 34,115

Mail Stop RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This Request for Continued Examination (RCE) is being made as follows:

1. Submission Required under 37 CFR 1.114:

- (X) Enclosed:
 - (X) Amendment/Reply in 8 pages.
 - (X) Affidavit(s)/Declaration(s).
 - (X) Information Disclosure Statement and PTO/SB/08 Equivalent (IDS and PTO/SB/08).
 - (X) 37 references enclosed.
 - (X) Return Postcard.

08/24/2007 SSITHIB1 00000036 09851230

01 FC:1801 790.00 0P
02 FC:1202 100.00 0P

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2. Fees:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
RCE Fee		1801 (\$790)		\$790
Total Claims	38 - 36 = 2	1202 (\$50)	2 x 50 =	\$100
Independent Claims	3 - 10 = 0	1201 (\$200)	0 x 200 =	\$0
1 Month Extension		1251 (\$120)		\$120
IDS Fee				\$180
			TOTAL FEE DUE	\$1190

(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

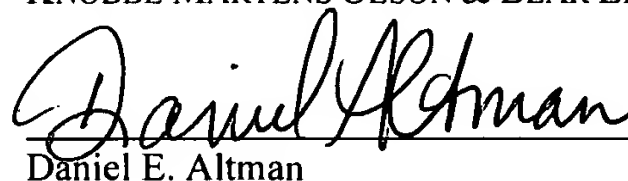
3. Payment:

(X) Check in the amount of \$1190 to cover the above fees is enclosed.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Dated: August 20, 2007

Respectfully submitted,
KNOBBE MARTENS OLSON & BEAR LLP


Daniel E. Altman

Registration No. 34,115
Attorney of Record
Customer No. 20,995
(949) 760-0404